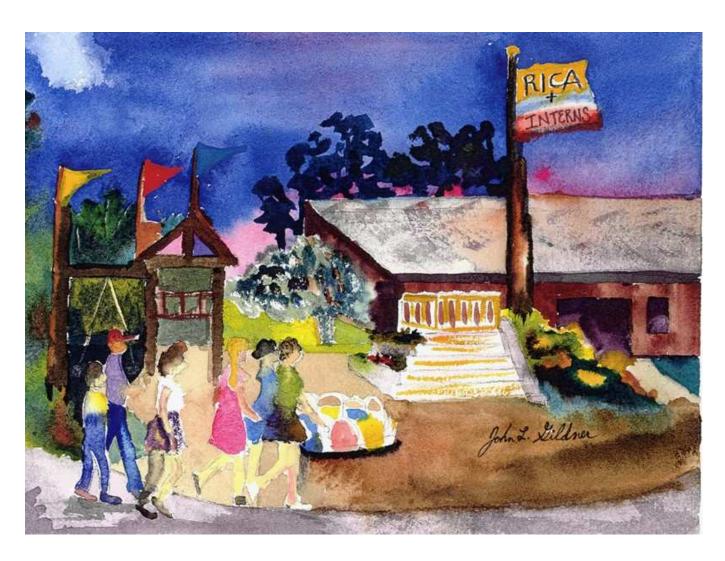
PREDOCTORAL INTERNSHIP IN CLINICAL PSYCHOLOGY



The John L. Gildner Regional Institute for Children and Adolescents Rockville, Maryland

State of Maryland
Department of Health and Mental Hygiene
Mental Hygiene Administration

APA Accredited

(Revised October 2011)

¹APA Committee on Accreditation, 750 First Street, NE, Washington, DC 20002-4242 (202) 336-5979

The John L. Gildner-RICA PREDOCTORAL CLINICAL PSYCHOLOGY INTERNSHIP

The John L. Gildner Regional Institute for Children and Adolescents (JLG-RICA) is a State supported, community-based residential and day treatment center and school for 180 emotionally disturbed children and adolescents, ages 11-20. JLG-RICA first began admitting students in 1980 and has held full accreditation status by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) since 1981. JLG-RICA is an interagency program operated by the State of Maryland Department of Health and Mental Hygiene (DHMH) in partnership with Montgomery County Public Schools (MCPS). The JLG-RICA School is one of only a handful of Maryland Special Education Schools to meet most of the standards for Adequate Yearly Progress (AYP) on the Maryland School Assessments. AYP measures school achievements based on attendance and graduation rate, as well as math and reading scores. Day treatment students are accepted from Montgomery County. Residential students are admitted from Montgomery and surrounding counties (Carroll, Frederick, Howard, Prince Georges and Washington).

JLG-RICA offers a full range of services: day treatment, milieu therapy, psychopharmacology, recreational and expressive therapies, individual, family and group therapy, and a fully accredited Special Education school with academic and vocational programming. The clinical staff is comprised of five psychiatrists, ten psychologists, six licensed clinical social workers, one psychiatric nurse clinicians and two expressive therapists. In addition, we have a staff of registered nurses and residential counselors. School staff are employed by MCPS and include certified Special Education teachers and instructional assistants. During the school day medical coverage is provided by the health suite staff, comprised of a registered nurse and a part-time pediatrician.

JLG-RICA is built on a 15-acre campus and consists of an administrative/clinical building that adjoins the school building. There is also an indoor pool, an exercise room and a refurbished gymnasium. Basketball courts, two baseball diamonds and a large football/soccer field surround the school building. The facility is handicap-accessible and has been upgraded to meet ADA guidelines. JLG-RICA is in close proximity of the Capitol beltway and public transportation, including the Metro, an efficient subway serving the metropolitan Washington area.

MULTIDISCIPLINARY APPROACH

A multidisciplinary approach is the foundation of the JLG-RICA treatment program. The clinical, residential and educational programs are integrated through the **team concept** and the coordination of the individual treatment plan (ITP) and the individual education plan (IEP). A clinical therapist is at the core of each child's Treatment Team and serves as both primary therapist (providing individual and family therapy) and case manager.

An expressive therapist, residential staff and school staff are assigned to each child and his/her family throughout their stay at JLG-RICA. In addition, a consulting psychiatrist works closely with each Treatment Team. This Team develops implements and monitors the student's total program. Students are involved in individual and group therapy, with the frequency determined

by each student's needs. All families are expected to be involved in family therapy. Therapists are available to see families during day and/or evening hours. A student's behavioral progress is monitored through the use of a "phase" a structured behavior modification program involving both short and long-term goals for increasingly appropriate behavior.

The residential program provides a 24-hour living environment for students who are unable to function in the community or at school without intensive intervention. Within the residential program, the staff fosters personal and social growth, independent living, goal setting for the future and group cohesiveness, based on each student's developmental level. The goal of treatment for residential students is their return to their family or, when necessary, placement in a group home or specialized foster care.

Expressive therapy services offer a variety of process-oriented therapies based on each student's emotional needs and developmental skill level. These therapies currently include art, music and movement modalities. Interns often choose to co-lead these groups as a way to maximize exposure to our younger students and to develop an appreciation for these alternative treatment modalities.

A special eight-bed Evaluation Unit (EU) is provided for adolescents who have been ordered into residential treatment by the juvenile court for the purpose of gathering psychological, educational, social and psychiatric assessments that will ultimately determine placement recommendations. Interns are assigned a six-month rotation on the EU and are responsible for up to two clinical cases under supervision. Prabha Menon, Psy.D. is the director of this unit. As part of their testing requirement, interns may also conduct psychological evaluations on the EU if their skills are at the required level.

The primary emphasis of the educational program is social/emotional skill development through the use of the academic curriculum and a strong behavior management system. A variety of specialized services are offered in a highly structured classroom setting which stresses the consistent implementation of each student's IEP. Instruction follows the MCPS program of studies. Academic and special course offerings include English/language arts/reading, math through pre-calculus, Spanish, social studies/history/government, sciences, art, physical education, industrial arts, career awareness and computer literacy. Vocational course offerings include technology education and supervised jobs in and outside of school.

"Transition" is the process by which a student gradually moves out of residence to live at home with his/her parents or in a group home. Students are "transitioned" to living at home through a Team decision. "Mainstreaming" is the term used to describe the process of successful student transition from JLG-RICA to a less restrictive educational or vocational placement. Eligibility for mainstreaming is determined by the multidisciplinary Team, which monitors all facets of a student's educational and therapeutic program. JLG-RICA staff work closely with a student's home school to ensure a smooth transition. The main goals of the JLG-RICA School program are the full-time successful mainstreaming of students into a less restrictive environment and providing all students with a successful educational opportunity.

GENERAL DESCRIPTION OF INTERNSHIP PROGRAM

JLG-RICA is highly committed to the training of doctoral interns in psychology. Our predoctoral internship training program is designed to meet the one-year requirement for obtaining the

Doctor of Philosophy (Ph.D.) or Psychology (Psy.D.) degree in Clinical Psychology. In June 1991 the APA granted the JLG-RICA internship program provisional accreditation as a Clinical Psychology Predoctoral Internship (as is traditional at a program's onset). We have successfully maintained full accreditation status² through three APA site visits, the first in October 1996, the second in May 2001, and in March 2006. The internship program adheres to the standards of the Association of Psychology Postdoctoral and Internship Centers (APPIC), as well as those of the National Register of Health Providers in Psychology. Only applicants from Clinical Psychology programs are considered. We offer three fully funded positions, plus State employee benefits including health insurance, vacation and all State holidays. The current stipend is \$26,403. The internship begins in mid-August and continues into the following mid-August for one calendar year (2,000 hours required).

STUDENT DIVERSITY

The JLG-RICA student population is quite diverse in terms of age, race and ethnic backgrounds, gender and psychopathology. Current demographic statistics are as follows: Gender distribution is typically 31% female and 69% male. Ages range from 11-20 years old, with an overall average age of 15 for all students.

JLG-RICA students are drawn from the racial and cultural backgrounds represented in surrounding Maryland counties. Currently, 54% of our students come from minority groups, the largest of which is African-American (46% of all students). Other, smaller percentages of students come from Latino (8%), Asian (1%), and other ethnic backgrounds (3%).

The most common reported JLG-RICA family constellations are both biological parents present (54%); followed by single-parent households (43%), adoptive parents (10%), and blended families with stepparents (2%). The overall socioeconomic status of JLG-RICA families is normally distributed and divided into five groups. At present, our clients are somewhat overrepresentative of the lower middle income group.

Other student characteristics of interest include adoption outside the family and birth order. Twelve percent of JLG-RICA students are adopted. Some of our students are either court ordered to JLG-RICA (5%) or court involved. Many of our students also come from families involved with the Department of Child Welfare or Child Protective Services.

The most common diagnoses our students have on admission to our program are Attention Deficit-Hyperactivity Disorder, Oppositional Defiant Disorder, Mood Disorder NOS, Depressive and Bipolar Disorders. These diagnoses often occur in combination with learning disabilities. Other types of psychopathology seen in the JLG-RICA population include personality disorders, anxiety disorders, Conduct Disorder, Impulse Control Disorder, Asperger's Disorder, Post-Traumatic Stress Disorder, eating disorders, psychotic disorders, and substance abuse disorders.

PHILOSOPHY

Our facility's late Chief Executive Officer, John L. Gildner, articulated the following Mission Statement for the facility: "To provide the best possible patient care and education to all students and their families."

² APA Committee on Accreditation, 750 First Street, NE, Washington, DC 20002-4242 (202) 336-5979

JLG-RICA's mission is actualized through the Vision Statement, which strives to make the facility "a resilient and fully integrated multidisciplinary program, which addresses each realm of functioning for every client in our care."

In accordance with this mission and vision, the JLG-RICA Predoctoral Clinical Psychology Internship Training Mission is: "To provide the best possible professional Psychology training within a multidisciplinary team setting for emotionally disturbed children, adolescents and their families."

The twin tenets of JLG-RICA's internship training program are:

- I. To provide a range of clinical experiences with emotionally disturbed children and adolescents that prepares interns to assume professional responsibility in a variety of related settings, and
- II. For interns to achieve a thorough integration of psychological knowledge, theory and practice.

The training model used to achieve these goals most closely fits the practitioner model, with the emphasis on clinical practice and service delivery, as well as learning by doing. Elements of the scientist-practitioner and scholarship-practitioner models are also evident, but less prominent in the training program. Consistent with the practitioner model, interns are treated as professional colleagues who are expected to function as "primary" clinical therapists and fully integrated members of their respective Treatment Teams. They are guided and supported throughout their internship year by intensive supervision, mentoring and a planned sequence of relevant training activities. Interns are exposed to the role of psychologists as scientist-practitioners through their involvement in a yearlong clinical research or program evaluation project. The scholarship-practitioner model is manifested through the Psychology Seminar series, a forum that promotes critical thinking and evaluation of research based knowledge.

Of particular relevance to the training program is the overall philosophy of the facility at large; specifically that treatment for our population is best provided by a systems oriented, multidisciplinary team approach. The Treatment Team respects that each student is connected to a system comprised of the individual, his/her family, school and community. Individualized treatment planning is implemented by a multidisciplinary Team consisting of clinical, residential and educational staff who work directly with the child.

At the center of each child's Treatment Team is a primary therapist who serves as the individual and family therapist, mental health consultant and case manager. The primary therapist, in consultation with the Team, develops the individual treatment plan (ITP) and subsequently coordinates and monitors its implementation. Interns are trained foremost in carrying out this demanding and complex role. Secondary roles include psychological assessment service provider, group therapist and applied clinical researcher.

We believe that by training our interns to handle multiple clinical roles within a complex multidisciplinary system, we are helping them acquire the skills and flexibility to function in a wide variety of clinical settings. In the ever-changing mental health market, psychologists must learn to adapt to different settings, roles and responsibilities while maintaining a distinct and

professional identity. Our graduates have given us feedback that their experience at JLG-RICA helped them to "fit in" with their subsequent job settings and prepared them to handle a variety of experiences with confidence.

The psychology internship is an integral part of the JLG-RICA clinical program. Other members of the clinical staff are always eager to work with the interns because they bring new ideas, different treatment approaches, and a fresh perspective to the facility.

EXPECTATIONS, GOALS AND OPPORTUNITIES

Upon completion of the program the intern will be expected to perform psychological assessments, individual, group and family therapies, and consultation at an entry level of professional competence. Training goals are as follows:

- 1. Interns will gain entry level professional clinical skill and competence in providing individual, family and group psychotherapy, as well as case management responsibilities with a child/adolescent population
- 2. Interns will be able to provide consultation and liaison within JLG-RICA's multidisciplinary system, as well as to community agencies
- 3. Interns will learn and apply ethical standards to the practice of psychology
- 4. Interns will develop and strengthen psychological assessment techniques appropriate to children and adolescents with special needs
- 5. Interns will understand organizational functioning and the dynamic process inherent in a group in particular, the purposeful professional role of the psychologist in a complex mental health organization
- 6. Interns will gain an understanding of the main issues involved in conducting applied research and program evaluation within a mental health agency
- 7. Interns will integrate academically acquired information and apply this knowledge to the practice of psychology through participation in training seminars, workshops, and staff meetings
- 8. Interns will utilize supervision and collaboration to accomplish the above goals In order to achieve these goals, interns will be available to JLG-RICA a minimum of 40 hours per week for 12 months (i.e., the goal of which is to accrue 2,000 hours). In the area of assessment, the intern is expected to have prior experience with and the ability to administer a variety of cognitive and personality instruments, as well as interpret and communicate these findings in both written and oral form. The intern is also expected to have a thorough knowledge of psychopathology, of the assessment literature, and of DSM-IV classifications.

The internship will enhance and refine these skills through the intern's participation in various seminars and through intensive one-to-one supervision of 10 psychological evaluations.

Students tested range in age from 11-20 and may include some students placed on the EU, as well as regular residential and day treatment students.

Another primary focus of the psychology internship program is the development of psychotherapy skills. Interns will be expected to demonstrate professional, entry level competence in the following areas: interviewing skills, observational skills, intervention and interpretation skills, the ability to formulate appropriate treatment goals, the ability to conceptualize cases theoretically, and a thorough understanding of major theories of personality and psychotherapy. Each intern is expected to carry five supervised cases (5-10 individual therapy hours and 4-5 family therapy hours per week) at most times during the year and to participate as a co-therapist in two group therapy experiences. Each intern also carries 1-2 additional short-term therapy cases for six months during their EU rotation.

In addition to the basic core skills described above, the intern serves as a case manager for his/her five cases, thus building his/her consultation skills through conferring with educational and residential staff regarding behavior management and clinical issues. Skills in crisis intervention and mental status assessment are also developed over the internship year.

In keeping with the model of scientist-practitioner, the psychology internship program participates in an active program of clinical research and evaluation of treatment effectiveness. Kerstin Youman, PhD, a staff psychologist, also serves as the Director of Research and Program Evaluation. Interns may develop projects in collaboration with Dr. Youman, the Research Committee, and other clinical staff. Interns may find opportunities for dissertation research as well. All interns work weekly with a member of the Research Committee to learn about program evaluation and to conduct a focused program evaluation/research project with expectations of a completed project presentation, report, and/or possible publication.

Interns are expected to abide by the rules and guidelines provided by the JLG-RICA staff and to perform in a competent and professional manner. Interns will act in accordance with professional standards and ethics as prescribed by APA and as is customary at JLG-RICA. Should a problem or conflict arise, a procedure is in place to address intern grievances both within the psychology internship program, and as a part of JLG-RICA's routine personnel counseling. This information (per APA standards) is made available to interns during their orientation in August. Intern applicants may also ask to see this information during interviews.

STRUCTURE

Each intern is assigned to a multidisciplinary Team and serves as primary therapist/case manager to students and their families within the Team structure. The major clinical rotation is with adolescent students (ages 11-20). Each student is seen in individual therapy for at least one session a week and families are seen weekly. Interns often see their students twice a week for psychotherapy as their schedule permits. Interns also serve as co-therapists for two therapy groups of adolescents or younger children.

All clinical experiences are closely supervised. Supervision for individual and family psychotherapy is provided by staff psychologists and consists of a minimum of two hours weekly. During their EU rotation, Dr. Menon will supervise the intern for one hour. Supervision for group psychotherapy is provided by a member of the psychology staff in intern group format supervision, as well as from the co-leader, who may be from a different discipline (e.g.,

social work, expressive therapy, or psychiatry). As a role modeling experience, interns also participate in family co-therapy with one of their clinical supervisors. In addition, the intern can expect at least one hour weekly of direct individual supervision for psychological assessments. Throughout the year the intern will be exposed to supervisors from a variety of theoretical orientations. A list of current psychology supervisory staff, clinical staff, psychiatric consultants and past interns is included in the Addendum. Each intern will also meet weekly with his/her Team leader for one hour of administrative and case management supervision, and with his/her Team psychiatrist for a half-hour of consultation. Current training facilities available at JLG-RICA include private offices, voicemail, personal desktop computers, videotaping, group meeting rooms, and test equipment for cognitive and personality assessment, as well as neuropsychological screening. Computer scoring programs are available for the BASC-2, Rorschach, MMPI-A, and Jesness Inventory.

The JLG-RICA psychology staff offers a weekly Psychology Seminar on clinical, ethical and professional issues. In addition, interns participate in a clinical case conference with outside consultants each month. Workshops and seminars offered by professional groups in the area, such as the Maryland Psychological Association and by psychiatric hospitals, universities and NIMH, are also available to the interns. Dr. Cohen will provide weekly supervision of the interns for group therapy. Dr. Donahue, the Training Director, also holds a weekly meeting to discuss intern progress.

A crucial part of internship training is personal growth. Interns share information and experiences with one another through participation in the trainee process group under the leadership of Thomas Perlet, LGSW. They work toward professional growth with the Training Director weekly and at the monthly psychology staff business meetings. These experiences are intended to support the intern through the stresses of working with a difficult population and to facilitate the development of the intern's identity as a professional psychologist.

JLG-RICA SUPERVISORY PSYCHOLOGY STAFF

Monya Cohen, Psy.D.

Doctorate in Clinical Psychology, The American School of Professional Psychology/Argosy University, Virginia 2001. Maryland License. Primary Therapist, Team II. Clinical Interests: Trauma assessment, intervention and treatment, child development and attachment, and sand tray therapy.

Charles Curtis, Ph.D.

Doctorate in Clinical Psychology, University of Virginia, 2008. Primary Therapist, Team III. Clinical Interests: Societal and environmental influences of pathology, culturally sensitive psychotherapy, attachment theory, identity development. Research Interests: Protection against the influences of racism.

Joan Marie Donahue, Ph.D.

Doctorate in Counseling, Catholic University 1985. Maryland License. Director of Internship Training, , Primary Therapist, Team II and Evaluation Unit. Clinical Interests: Psychological Assessment, Forensic Psychology, Child Development, Play Therapy, and Suicide and Depression in Adolescents.

Susan Eastman, LCPCC, ATR-BC

Radford University 1985; Masters of Arts in Art Therapy, George Washington University 1988; Post Graduate Certificate in Clinical Community Counseling, Johns Hopkins University 2004.

Amberlyn Mathis, Psy.D.

Doctorate in Clinical Psychology, American School of Professional Psychology/Argosy University, Washington, DC 2011. Primary Therapist, Team I. Clinical Interests: Child and Adolescent Psychology, Integrative Approaches to Psychotherapy, Culturally Sensitive Psychotherapy, Psychological Assessment, and Integration of Yoga and Psychotherapy.

Jill R. McCulloch, Ph.D.

Doctorate in Clinical Psychology, Northwestern University-Feinberg School of Medicine. Primary Therapist, Team I. Clinical Interests: Clinical Child and Adolescent Psychology, Cognitive Behavioral and Integrative Interventions and Treatment, Diagnostic Co-morbidity. Research Interests: Children's Mental Health Services and Policy, Program Development and Evaluation, Under-served Youth and Families.

Prabha Menon, Psy.D.

Doctorate in Clinical Psychology, American School of Professional Psychology/Argosy University, Washington, DC 2004. Director of the Evaluation Unit, Primary Therapist, Team II. Clinical Interests: Clinical Child Psychology, Psychological Assessments, Play Therapy, Forensic Psychology. Adjunct Faculty, Argosy University.

Patrick G. Mitchell, Psy.D.

Doctorate in Clinical Psychology, American School of Professional Psychology/Argosy University, Washington, DC 2009; Primary Therapist, Team IV. Clinical Interests: Cognitive-Behavioral Therapy, Child Behavior Management and Parent Training, Psychological Assessment, Learning Disorders, Social Skills Training through Sports.

Elissa Stieglitz, Ph.D.

Doctorate in Clinical Psychology, Yeshiva University 1991. Maryland License. Team Leader, Team IV and Primary Therapist. Clinical Interests: Play Therapy, Child Development and Psychopathology, Psychodynamic Psychotherapy, and Psychological Assessment.

Tammy Villines, Psv.D.

Doctorate in Clinical Psychology, American School of Professional Psychology/Argosy University, Washington, DC 2004. Primary Therapist, Team II. Evaluator for the Evaluation Unit. Clinical Interests: Neuropsychological/Psychological Assessment, Learning Disabilities/Attentional Disorders, Pervasive Developmental Disorders, Family Systems Therapy, Psychodynamic Psychotherapy.

Kerstin Youman, Ph.D.

Doctorate in Clinical Psychology, George Mason University 2010; Director of Research, Primary Therapist, Team I. Clinical Interests: Cross-cultural Psychotherapy, Child and Adolescent Psychology, Delinquency Prevention, Mindfulness, Motivational Interviewing. Research Interests: Delinquency Prevention, Program Evaluation, Jail-based Interventions and Programs.

OTHER JLG-RICA CLINICAL STAFF

Clinical Administrators

Kenneth Basler, Chief Executive Officer/Chief Operations Officer Claudette Bernstein, M.D., Medical Director Gary Fried, LCSW-C, Director of Clinical Services Bobbi Alexander, R.N.M.B., Director of Residential and Nursing Services

Child Psychiatrists

Rebecca Edelson M.D. (Team II and III) Rick Imirowicz, M.D. (Team II and IV) Hector Prarada M.D. (Team 1 and Evaluation Unit) Shira Rubinstein, M.D. (Team II)

Primary Therapists

Clinical Social Workers:

Kelly Bedell, LCSW-C, (Team III)
Joan Gottesman, LCSW-C, (Team Leader, Team II)
Thomas Perlet LGSW (Team IV)
Barry Rosenberg, LCSW-C, (Team III)

Nurse Clinician(s):

Nancy Barkoviak, MSN, RNCS (Team Leader, Team I)

Expressive Therapists:

Susan Eastman, LCPCC, ATR-BC Andreé Schillesci, MA, ADTR, (Movement Therapy) Sarah Ware, MMT, MT-BC

PSYCHOLOGY TRAINING PROGRAM - TEN YEARS' PREVIOUS TRAINEES

2011-2012

- Lauren Christopher The Wright Institute
- Ann Kimball Chicago School of Professional Psychology
- Kathleen McDonald University of Hartford

2010-2011

- Amberlyn Mathis American School of Professional Psychology at Argosy
- Hilary Roscoe George Washington University
- Amanda Sovik-Johnston University of Virginia

2009-2010

- Molly Barnett Alliant International University
- Chelsea Weyand Indiana State University
- Kerstin Youman George Mason University

2008-2009

- Tanisha Bracey Loyola College, Maryland
- Sukeshi Ghosh American School of Professional Psychology at Argosy
- Kristin Rose Spalding University, School of Professional Psychology

2007-2008

- Charles Curtis University of Virginia
- Kacie Fisher American School of Professional Psychology at Argosy
- Kimberly Kruse Florida School of Professional Psychology at Argosy, Tampa

2006-2007

- Shira Benhorin DePaul University
- Lynn Maciolek American School of Professional Psychology at Argosy
- Maisley Paxton Catholic University

2005-2006

- Nicole Beadles University of Virginia
- Erica Fener George Washington University

2004-2005

- Steven Harner American School of Professional Psychology at Argosy
- Barbra Kay Massachusetts School of Professional Psychology
- Beth Silver American School of Professional Psychology at Argosy

2003-2004

- Perétte Arrington George Washington University
- Elspeth Bell Fordham University
- Prabha Menon American School of Professional Psychology/Argosy University

2002-2003

- Kristie McGurk Texas Tech University
- Adrienne Mitchell George Washington University
- James Venza Long Island University

2001-2002

- Samara Belman George Mason University
- Frances Brookner George Washington University
- Romita Sillitti Chicago School of Professional Psychology

2000-2001

- Joshua Chinitz University of Maryland, College Park
- Jennifer Sahatjian University of Hartford
- Reneé Ussery Georgia School of Professional Psychology

1999-2000

- Bernice Conklin-Powers Loyola College in Maryland
- William Deubert George Washington University
- Carrie Watson Howard University

APPLICATION PROCEDURE

Applicants must be enrolled in an APA accredited³ doctoral program in clinical **psychology**. All formal course work and comprehensive examinations for the doctorate must be completed. Applicants must have a minimum of one year of practicum experience (1,000 hours), including psychological testing and psychotherapy.

Preference is given to applicants who have course work and experience in projective testing (must include Exner Rorschach), family therapy, child psychopathology, personality theory, and therapy practicum experience with children and adolescents.

Applications and all necessary attachments must be received by **November 11**, **2011**.

Psychology Internship Secretary Phone: 301-251-6861 John L. Gildner-RICA 301-309-9004 Fax: 15000 Broschart Road

APPLICATIONS ARE TO BE SUBMITTED TO WWW.APPIC.ORG WEBSITE BY CLICKING ON "AAPI ONLINE" AND INCLUDE:

- 1. AAPIC Application for Psychology Internship (AAPI)
- 2. Current curriculum vita

Rockville, MD 20850-3392

- Official transcripts of all graduate credits 3.
- 3 letters of recommendation (at least one of these letters must be from a clinical 4. supervisor who knows the candidate's clinical skills)
- 5. A copy of one full battery psychological test report that is representative of the candidate's integration of several sources of testing information – preference is given for child or adolescent psychological reports. The report should be reasonable in length, and names must be blacked out for confidentiality.

In addition, personal interviews are required of those applicants who pass the first phase of the screening process. In those instances in which traveling distance prohibits a personal interview, a telephone interview may be substituted.

For further information, you can reach Dr. Donahue via email at jdonahue@dhmh.state.md.us or by telephone at **(301) 251-6973**

ADMINISTRATIVE MATTERS

Interns receive a thorough orientation upon employment in mid-August that will cover procedures for intern performance evaluation and JLG-RICA's policies regarding advising, retention, termination and reporting of intern grievances. These administrative matters are also included in the JLG-RICA Psychology Internship Handbook, which is made available to interns upon request. These matters are covered in accordance with the APA Guidelines and Principles for Accreditation⁴ in Professional Psychology.

This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept or use any ranking-rated information from any intern applicant.

³ APA Committee on Accreditation, 750 First Street, NE, Washington, DC 20002-4242 (202) 336-5979

⁴ APA Committee on Accreditation, 750 First Street, NE, Washington, DC 20002-4242 (202) 336-5979